

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <u>9950000 78689</u>		FILED 97 JUN 18 PM 1:29 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
1. Corporation Name Bleu et Rouge Caribbean Company			
Principal Place of Business 3450 East Lake Rd. Palm Harbor, FL 34685		Mailing Address 3450 East Lake Rd. Palm Harbor, FL 34685	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.			
2. New Principal Office Address, if Applicable 3450 East Lake Rd. Suite, Apt. #, etc. Suite 301 City & State Palm Harbor, FL Zip 34685		3. New Mailing Office Address, if Applicable 3450 East Lake Rd. Suite, Apt. #, etc. Suite 301 City & State Palm Harbor, FL Zip 34685	
		4. Date Incorporated or Qualified To Do Business in Florida October 13, 1995	
		5. FEI Number 59-3344067	
		6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required for a Certificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Pres	Mary Anne Schmidt	3450 East Lake Rd. Ste. 301	Palm Harbor, FL 34685
	Jeffrey E. Cosnow	3450 East Lake Rd. Suite 301	Palm Harbor, FL 34585
8. Name and Address of Current Registered Agent Jeffrey E. Cosnow 3450 East Lake Road Suite 301 Palm Harbor, FL 34685		9. Name and Address of New Registered Agent Jeffrey E. Cosnow Street Address (P.O. Box Number is Not Acceptable) 3450 East Lake Road Suite, Apt. #, Etc. Suite 301 City Palm Harbor State FL Zip Code 34685	
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent <i>Jeffrey E. Cosnow</i> Date 6-16-97 REGISTERED AGENT MUST SIGN			
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)			
12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.			
SIGNATURE: <i>Jeffrey E. Cosnow</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		6-16-97 (813) 786-7167 Date Daytime Phone #	

CR2E040 (12/96)